DECT AVAILABLE COPY

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

09902929

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPEO			OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			44					RATE	FEE		RATE	FEE
FOR ·			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			44 minus 20=		• 24			X\$ 9=	216	OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		* 4			X40=	160	OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM PI					+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter					r "0" i n c	olumn 2	Į	TOTAL	13/	OR	TOTAL	
Claims as amended - Part II								•	1	-	OTHER	I
	on project over the state of south the state of the state	(Column 1)	en illinois and	(Colu		(Column 3)	1 ra	SMALLE		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	T CL AIM	[=		X40=		OR	X80=	
	THOTTHEOL		OLIN EE DEI	LIVELY	CLANI			+135=	' 	OR	+270=	
							יו	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)								NDD11.1 EE [. و	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	T CL AIM	= 	$\ \ $	X40=		OR	X80=	
<u> </u>	TINOT PRESE	NIATION OF MI		ENDEM	CLAIIVI	<u> </u>	ا لا	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T OL 4114	=	╢╟	X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	'ENDEN	1 CLAIM]	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											TOTAL	
***	If the "Highest Nur	mber Previously P ber Previously Pa	aid For" IN THI	S SPACE	is less tha	ın 3, enter "3."	,	ADDIT. FEE	propriate bo	J	ADDIT. FEE lumn 1	<u></u>